2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 04, 2004
Secretary of State

DOCUMENT# L03000053435

Entity Name: SGE DEVELOPMENT, L.L.C.

Current Principal Place of Business:

24280 SOUTH TAMIAMI TRAIL
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

24280 SOUTH TAMIAMI TRAIL
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 43-2041180 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NICHOLS, JAMES LARRY ESQ
8191 COLLEGE PARKWAY, #204
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title:	MGRM	( ) Delete
Name:	KNIGHT, STEEVEN C	
Address:	24280 SOUTH TAMIAMI TRAIL	
City-St-Zip:	BONITA SPRINGS, FL 34134	
Title:	MGRM	(X) Delete
Name:	BAYLOR, GARY	
Address:	5225 NAUTILUS DRIVE	
City-St-Zip:	CAPE CORAL, FL 33904	
Title:	MGRM	(X) Delete
Name:	PANUS, EDWARD J	
Address:	4435 S.E. 20TH PLACE	
City-St-Zip:	CAPE CORAL, FL 33904	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAMES LARRY NICHOLS RA 02/04/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date